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**BREAKING PARADIGMS
OVERCOMING CAREER OBSTACLES IN ARMY NURSING**

BY

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United States Army

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BREAKING PARADIGMS: OVERCOMING CAREER OBSTACLES IN ARMY NURSING

AN INDIVIDUAL STUDY PROJECT

by

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Army Nurses (ANs) confront a truncated career path, discouraging aspiring nurses while depriving the Army of talents of this group of senior officers. Leadership and management skills, analytical competence, sound decision making ability, fortitude, perspective, and endurance are examples of attributes strengthened throughout a nursing/military career. Such attributes are assets in any military discipline and would enable ANs to flourish in atypical command and staff positions at senior levels. Unfortunately, societal conditioning, institutional resistance, inadequate understanding of the profession of nursing, and failure of ANs to fully appreciate their responsibilities as Army Officers contribute to truncated careers. This paper identifies specific obstacles to atypical career progression for ANs and delineates techniques and competencies to overcome obstacles and prepare ANs to achieve atypical career progression.

BREAKING PARADIGMS: OVERCOMING CAREER OBSTACLES IN ARMY NURSING

Introduction

Army Nurses (ANs) confront a truncated career path, discouraging aspiring nurses while depriving the Army of talents of this group of senior officers.

ANs are called upon daily to exert leadership and management skills, ensuring coordination of all aspects of patient care among health care providers competing for patient's time. Nurses are the consistent element in a patient's hospital stay, assuring the wishes of health care personnel are not in conflict with each other or with patient well-being. Functioning in a high-stress, highly emotional and physical environment, nurses make difficult decisions, often involving issues of life and death. Analytical competence is achieved through rational and systematic use of a wide variety of patient information, gathered visually, through physical examination, and evaluation of medical tests. Strong organizational skills are mandatory; ability to prioritize and reprioritize based on changing situations is essential. Fortitude to remain a patient advocate in spite of pressures to be a proponent for a sometimes detached medical system is needed to remain true to professional ethics. Perspective and endurance are qualities of daily survival.

These attributes, strengthened throughout a nursing career, are assets to any military discipline. They are the foundation enabling ANs to flourish in atypical command and staff positions at senior levels and should be capitalized upon by the Army.

Purpose

The purpose of this paper is to specify:

- *impediments to atypical career progression for female Army Nurses

- *techniques and competencies enhancing readiness for atypical career opportunities

This paper will focus on preparation of female ANs to acquire atypical positions at the general officer level. The focus on females is not meant to disregard the ongoing, equally strong and positive contributions of male members of the Corps.

Background

Progressing from voluntary services provided ill and injured soldiers to the Regular Army Commissions of today, ANs "have come a long way." The Army Nurse Corps (ANC) is recognized as an innovative leader in professional nursing by both the Federal and civilian nursing communities. Great pride is taken by the Corps in individual and collective accomplishments of ANs.

Much work remains to fully integrate nurses into the military community and permit maximum use of their abilities. Colonel Anna Mae Hays was promoted as Chief, Army Nurse Corps, to Brigadier General in 1970. This was the first time in the United States Army's 196 year history that a woman was elevated to the rank of General Officer. Until 1991, the Corps Chief served her four year term and retired. General Clara Adams-Ender "broke the mold"; upon expiration of her term as Corps Chief, she moved on to become Commander, Fort Belvoir, Virginia, and Deputy Commander, Military District of Washington, D.C., Major General positions.

Army Nurses are fortunate to have such a successful role model as General Adams-Ender. Triply "blessed" by being black, female, and a nurse -- she is successfully competing in a "man's world," crossing gender barriers, opening new career opportunities for ANs. Eight hours of oral history interviews provide insights into her preparation to acquire the position of Chief, Army Nurse Corps, and Director of Personnel for The Surgeon General, and then proceed to assume positions heretofore reserved for male, non-nursing, General Officers. She is currently competing for her second star, a stepping stone to her goal of Deputy Chief of Staff, Personnel, for the Army. By advancing into a male dominated, non-nursing position, General Adams-Ender is opening doors for similar achievements by ANs who, through education and experience, are prepared and motivated for the challenge.

Impediments to Atypical Career Progression

Societal conditioning and institutional resistance combine to restrain gains and impede professional diversity by senior nurses. Research and legend continue to assert women are weaker than men both emotionally and physically. Federal laws and service regulations bar women from serving in 48 percent of Army combat specialties.¹ As noncombat contributors to the Army mission, women struggle for full acceptance in a machismo-based organization. Army leadership's incomplete understanding of competencies cultivated during an Army nursing career and inadequate appreciation by Army Nurses of responsibilities inherent in being an Army Officer also contribute to truncated careers. Some

impediments are more easily overcome than others.

Combat Exclusion/Risk Rules

Although designed to support mission accomplishment and avoid controversy within society, combat exclusion/risk rules serve to sustain career obstacles for women. Congressional approval of the Equal Rights Amendment in 1972, followed by elimination of the draft in 1973, opened military doors to women and compelled restructuring of women's "place" within the organization. Concerns that increasing numbers of women would decrease combat effectiveness and force readiness resulted in establishing a 1981 policy review group to study the issue. Direct Combat Probability Coding (DCPC), referred to as the "combat exclusion rule," resulted from the study. In 1988 combat exclusion was further amplified through the "risk rule."² These rules are the foundation of today's Army policies toward women. Application is muddled as traditional distinctions between combat and combat support roles are blurred. Nurses are infrequently affected by these rules due to job requirements and traditional locations of Army hospitals in combat areas. Participation in non-linear combat allows use of these rules by paternalistic leaders to inhibit ability of nurses to perform their jobs by restricting their closeness to potential battle. During the 1991 Gulf War, female nurses were barred from participating in selected health provider activities due to proximity to battle (personal experience and professional communications).

Warrior Ethic

Society conditions both men and women to view women as needing protection and men as providing that protection -- the "warrior ethic." When discussions of drafting women or placing them closer than traditionally acceptable to combat arise, an often heard response is that American society will be "unable to tolerate women coming home in body bags." Brutality of war directed toward women appears to be more horrifying to society than when directed toward men. By invoking protector instincts of men, women distract them from their combat mission, causing concentration on ensuring safety and well-being of female soldiers. Or so goes the reasoning. Very little experience with women as combat casualties makes it difficult to counter such reasoning, or even to know if it can realistically be countered.

Hollywood movies and romantic novels add unrelenting fuel to the fire by invariably depicting females, often nurses, as sexually desirable, albeit physically incapable decorations to war scenarios. Characterizations of nurses performing nursing duties, often under heroic circumstances, are extremely difficult to find.³

Research Findings

Military-sponsored research studies show women as physically and emotionally unready or incapable of performing in high physical/mental stress positions. Studies indicate that in the aggregate females lack aggressiveness and psychological resistance to combat-generated stress, and are less suited than males to the rigors and demands of extended combat.⁴

Hidden Agendas

One of the greatest challenges to expanding career opportunities for women involves countering policies for which there is no official explanation beyond vague references, such as "implied will of Congress."⁵ This problem was brought home early this class year when a high-ranking Army officer firmly stated his opposition to allowing women to function as Army combat pilots, while his tone of voice conveyed he had no intention of discussing his reasons.

Allowing an AN to hold an atypical Table of Distribution and Allowance (TDA) position, such as Post Commander, introduces fears that they must be equally considered for other positions for which grade makes them eligible, of which some will be Table of Organizational Equipment (TOE) positions. Should General Adams-Ender prepare to assume a TOE position, rather than the TDA position of Deputy Chief of Staff for Personnel, she could create upheaval in an otherwise orderly system.

Affirmative Action

Affirmative action policies are both friend and foe. While some feel they have outlived their usefulness, others contend they are still needed to ensure conditioning and stereotyping do not continue to relegate women to subordinate roles. Such policies unintentionally subject military women to cries of reverse discrimination.

In general, women feel capable of competing on an equal footing with men for career opportunities. But, until institutional biases disappear or can be factually supported,

affirmative action policies remain relevant.

Techniques/Competencies for Achieving Atypical Career Progression

Selling the Profession: Army Nursing

As a profession, ANs have been and continue to be ineffectual in teaching others what Army nursing entails. Too often, others speak on behalf of the profession, promoting unqualified views of nursing capabilities and contributions. By assuming a passive role regarding attributes of the profession, nurses' highly transferrable leadership and management skills go unrecognized. These skills, perfected at patients' bedsides, are readily transmitted to and highly desirable in other military occupations/roles. Emotional stability and ability to endure prolonged and extreme stress are developed while caring for the critically ill. Such patients rely on nurses for timely and perceptive assessment/identification of subtle physical changes and for prompt and effective notification/implementation of treatment modalities. Ethical dilemmas, increasingly deliberated in health care arenas, add to emotional burdens of providing health care, forcing nurses to examine personal values and make difficult decisions regarding circumstances of care.

Leadership qualities and personal/professional characteristics brought to a position are perhaps more reliable indicators of successful job performance than initial technical job expertise. It is easier to learn overt requirements than to develop, especially at the senior level, personal and professional qualities, characteristics, and virtues. Through dynamics of the

health care profession, ANs have internalized desirable qualities, characteristics, and virtues and are prepared to assume positions beyond the realm of nursing, such as general officer command and staff positions.

Self-Awareness

An initial step for nurses in successfully challenging career obstacles is to know one's self. Articulating a vision for professional growth is useful in guiding actions and focusing efforts for achievement. General Adams-Ender identified "entities to be managed" shortly after her selection as Chief, Army Nurse Corps, was announced. Knowing she would frequently be asked her philosophy on nursing, Army nursing, women in the military, and the military as a profession, she put her philosophies in writing. The process of writing caused her to closely examine those ideals for which she "stands." Knowing what was important to her made decisions less complicated and more consistent. She also decided that before she could manage others she needed to manage herself. From this need she identified the following "entities":

*Values: She identified values important to her as a person and as an Army Officer. They are the foundation upon which she acts. Others, knowing her values, are able to predict her responses to alternatives, providing a basis for job performance. With her values, she creates an environment of consistency.

*Knowledge: Devoting significant time to both personal and professional development expands professional horizons. General Adams-Ender stresses benefits of learning about diverse

professions. Understanding other occupations/roles enhances cooperative efforts and "builds bridges" which may be useful later, if not at the moment. Ongoing, well-rounded self-development instills a level of professional comfort and belonging helpful in any situation.

*Relationships: Relationships must withstand the test of outside scrutiny. Unethical temptations need to be decisively shunned.

*Endurance and Persistence: Fitness generates endurance which promotes energy, emotional stability, and mental acuity -- invaluable attributes when challenging old thinking and preparing to enter new professional arenas. Persistence is the mental ability to continue in spite of discouragement. Physical and mental fitness produce the positive attitude necessary to tackle barriers again and again. Nurses with a positive attitude appreciate even the smallest gains and are inspired by them to continue.⁶

Style

In general, women believe hard work equals success. With hard work, efforts will be both recognized and appreciated, leading to getting ahead in the organization. What often goes unrecognized is that hard work is most often defined within the parameters of style -- the way in which work is accomplished. Quiet, diligent, hard workers are appreciated but rarely fully recognized for the magnitude of their contributions. People usually like wall-flowers because they have no reason to dislike them. Loyal to the chain of

command, they cooperate, often selflessly, with their peers. They tend to assume evaluation reports will be a fair assessment of past contributions and future potential.

Observation alone confirms those who produce results with style are those who catch the eye of the influential and proceed into career enhancing positions, correlating with increasing rank within the military. Those successfully linking style to results will be most quickly considered when challenging (atypical) positions arise. The more challenges accepted, the more influential officers impressed, the greater likelihood of rising to the top of the profession. In the case of a number of military specialties, rising to the top entails achievement of general officer rank. It is natural to postulate that shy and retiring officers, no matter how competent, rarely enjoy this degree of career success. Shy and retiring female officers are additionally disadvantaged by seldom being among those considered in the first place. When striving to break barriers and obtain access to atypical career opportunities within the military, style becomes important. It opens doors by securing consideration.

Political Prudence

Acquiring additional skills assists nurses in successfully achieving style and gaining full recognition and the career opportunities going with it. Often contemptuously referred to as "playing politics," it is nothing more than building human relationships and apportioning power.⁷

Shortly after acquiring a new position, nurses need to assess

the chain of command and peer competition. Objective evaluation of formal and informal networks of influence is needed. Cultivation of both increases effectiveness and builds influence.

Knowing what's going on within all facets of the work environment requires tapping into internal information networks at as many different sources as possible, never underestimating the value of any contribution to knowledge. General Adams-Ender receives useful information from janitors on up the organizational structure.⁸ Professional relationships should be solid enough to allow trading information, achieving respect, and cooperating with minimal jealousy and obstruction.

Obtaining timely information requires establishing positive working relationships with as many people as possible. For mission accomplishment, putting dislikes and differences aside, and concentrating on finding areas of agreement are important. Skill in finding and developing areas of agreement is valued at senior levels where consensus building is required for achievement.

Persuasion, the art of changing attitudes to create changes in behavior, is a primary tool for success. In the case of women, changing behaviors is often required prior to changing attitudes. Attitudes (stereotypes) regarding women and nurses are so culturally ingrained that waiting to change behavior as a result of changed attitudes could result in an ongoing professional stalemate or stagnation. In line with affirmative action policies, changes in behavior are mandated, trusting changes in attitudes will follow in a timely fashion. Nonetheless, persuasive abilities remain

potent tools for those seeking leverage.

Liberal use of positive feedback promotes feelings of loyalty to individuals and organizations. Counseling guides subordinates toward behavior which is professionally efficient, effective, and rewarding. Positive feedback and counseling build supportive and productive work environments.

It is especially important for women to keep feelings, resentments, and disappointments private. Revealing emotions supports gender criticisms of emotional instability/irrationality. Career strategies should also remain private. Individual interests/goals are easier to shelter and sustain when not subjected to whims of the competitive public domain.

Although a cornerstone of military success is team work, successful teams are formed by successful individuals who mesh personal goals with those of the institution.

Mentors

Ability, desire to teach, confidence as an individual and Army officer, and genuine liking of the individual are criteria for selecting mentors. Strong mentors provide information, advice, opportunities, and objective feedback on job performance and career potential. They also enhance professional acceptance and prestige, while strengthening sense of identity with the organization and the principles for which it stands.

Military Education

Participating in increasing levels of military education opportunities is imperative for competence and credibility within

the system. Nurses traditionally focus on nursing/health related education while neglecting and failing to appreciate military schooling. Having relatively few opportunities to attend military schools in-residence aggravates this tendency. Thus nurses do not fully understand the organization to which they may belong for more than 20 years -- thereby failing to internalize responsibilities as an Army officer. Nurses must make the extra effort to take military courses via correspondence, while developing the competitive advantage for in-residence attendance. Importance of attending Combined Arms Services Staff School and completing Command and General Staff and War College courses via correspondence or in-residence should begin being instilled upon entering active duty.

From a distinctly personal perspective, nurses should avail themselves of opportunities to become airborne- and air-assault qualified. Although few opportunities exist to use these skills, training benefits cannot be overemphasized. Such schools instill confidence, broaden understanding of and appreciation for the job requirements of others, increase ability to talk the language, and confer increased admiration/acceptance from military males who appreciate difficulties in achieving such qualifications.

Gender Based Communications

Exceptionally well researched, the book, You Just Don't Understand: Women and Men in Conversation, contends men's and women's communications differ in basic intentions.' Men's communications express desire for freedom and independence while

women's express need for interdependence and connection. Differences result in male communications being less personal and more aggressive than females. Not surprisingly, dissimilarities result in miscommunications, misjudged intentions, and misperceptions. Both sexes need to recognize gender biases and concentrate on minimizing their impact when interrelating. Awareness that gender based communications may be responsible for professional disconnects promotes rational analysis and encourages continuing efforts to achieve professional agreement.

Negotiation

Per Army War College instruction, collaboration and consensus-building replace competition at upper echelons of Army leadership. Successful negotiation skills support achievement of "win-win" solutions. Transitioning from healthy competition at lower levels to the give-and-take of transactions at the General Officer level can be difficult. Although negotiations are entered with desire on both sides to give as little as possible, attitudes of mutual gain and support are necessary ingredients. Negotiators try to sell an idea and through persuasion, hope their viewpoint will be adopted. According to Bob Woolf, a prominent negotiator for major league athletes and well-known entertainers, achieving negotiating success requires applying three tenets.

- *It's not necessary to be disagreeable to disagree.

- *Apply the Golden Rule.

- *Be true to convictions.¹⁰

Additional guidelines for successful negotiations might

include:

*Establish rapport with the other side. Foster the spirit of cooperation. Starting off on the right foot establishes a positive negotiating environment.

*Understand what the other side wants or needs. This streamlines negotiations by focusing on the other side's bottom line.

*Prepare for negotiating sessions. Knowing the facts supports searching for viable alternatives. It also decreases likelihood of being "hoodwinked." Applied information is power.

*Set goals but don't be arbitrary about achieving the last 5 percent. Demands for the last 5 percent may ultimately derail otherwise successful negotiations for insignificant gain.

*Don't make demands or give ultimatums. They annoy and diminish the spirit of cooperation. Do make suggestions, recommendations, proposals. Show all the dignity language can confer.

*Be a good listener. Especially in negotiations, silence may be golden, allowing the other side to inadvertently give ground or provide exclusive information regarding their position.

*Maximize strong points and minimize weaknesses while politely doing the opposite to the other side. Achieving leverage in negotiations is the intent.

*Communicate through the most advantageous means. Negotiating via phone call initiated by the other side is usually not a good idea. The caller had time to focus thoughts and ideas, while

catching the receiver unprepared and possibly distracted.

*Consider almost everything negotiable. This attitude expands negotiating tools, improving likelihood of success.

*Remain composed. Patience and deliberation reap rewards.

*Don't be intimidated by style, demeanor, or the written word.

*Remember your bottom line.

Nurses particularly need to hone negotiating skills. Historically contentious relationships with physicians create the strong urge to win when negotiating with them. A mind-set exists that to remain true to the profession and its members, nurses are compelled not to relent when negotiating issues. This attitude must be replaced by collaboration on behalf of patients, patient care, and career diversity. Negotiating skills highlighting the "win-win" perspective prepare nurses to enter atypical senior leadership roles requiring consensus-building.

Summary

Nurses are preparing and eager to assume atypical career roles at senior levels. Although barriers continue to exist, they will continue to fall. Incumbent upon nurses is the necessity to develop skills in which they are traditionally weak while maximizing those in which they are strong. Leadership/management skills and personal/professional characteristics of nurses can be readily transferred to non-nursing senior military positions. Especially during an era of downsizing, it is in the Army's best interests to take advantage of qualities nurses possess and are eager to exercise in atypical career roles.

Endnotes

1. Army Times (17 February 1992): 22.
2. Richard D. Hooker, Jr., "Affirmative Action and Combat Exclusion: Gender Roles in the US Army," Parameters 19 (December 1989): 38.
3. Michele Manning, "Angels of Mercy: The Army Nurse Corps on Bataan and Corregidor," Parameters 22 (Spring 1992): 99.
4. Richard D. Hooker, Jr., "Affirmative Action and Combat Exclusion: Gender Roles in the US Army," Parameters 19 (December 1989): 45.
5. Hooker, "Affirmative Action," 45.
6. Clara Adams-Ender, interview by author, Tape recording, Headquarters, Fort Belvoir, Virginia, 18 November 1991.
7. Marilyn Moats Kennedy, Office Politics: Seizing Power, Wielding Clout (New York: Warner Books, 1980), 121.
8. Clara Adams-Ender, interview.
9. Deborah Tannen, You Just Don't Understand: Women and Men in Conversation (New York: Ballantine Books, 1990), 40.
10. Bob Woolf, Friendly Persuasion: How to Negotiate and Win (New York: Berkley Books, 1991), 111.

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